Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main

		DUCUITEIIL	Faut I UI U
Fill in this info	rmation to identify your	case:	
Debtor 1	Jorge E Lema		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	19-28683		
()			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you fill your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Ра	rt 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	340,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,955.87
	1c. Copy line 63, Total of all property on Schedule A/B	\$	362,955.8
Pa	st 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	607,285.13
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.0
	Your total liabilities	\$	607,285.13
Pa	rt 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,938.8
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,636.59
Pa	Answer These Questions for Administrative and Statistical Records		
S.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main Document Page 2 of 6

Debtor 1 Jorge E Lema Case number (if known) 19-28683

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,992.39

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main

Document Page 3 of 6 Fill in this information to identify your case: Debtor 1 Jorge E Lema Middle Name Last Name First Name Debtor 2 (Spouse if, filina) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY Case number 19-28683 (if known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 Last 4 digits of account number \$0.00 \$0.00 \$0.00 Priority Creditor's Name PO BOX 7346 When was the debt incurred? Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

Is the claim subject to offset?

■ No

☐ Yes

Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main Document Page 4 of 6

Case number (if known) 19-28683

Deni	Jorge E Leilla		Case III	umber (ii known) 19-2	20003	
2.2	State of New Jersey	Last 4 digits of account numbe	r	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name	When was the debt incurred?				
	Division of Taxation Bankruptcy Unit	when was the dept incurred?	-			
	PO Box 245					
	Trenton, NJ 08695-0245	As of the data you file the claim	n io r Chaalral	II that annly		
Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim Contingent	ii is. Check ai	іі іпаі арріу		
	■ Debtor 1 only					
	,	☐ Unliquidated				
	Debtor 2 only	☐ Disputed Type of PRIORITY unsecured c	laim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations	iaiiii.			
	At least one of the debtors and another	_				
	Check if this claim is for a community debt	Taxes and certain other debts	-	=		
	Is the claim subject to offset? ■ No	Claims for death or personal in				
	☐ Yes	Other. Specify				
Dont	2. List All of Your NONDRIODITY Hyspania	and Olaima				
Part						
_	Do any creditors have nonpriority unsecured clain	,				
L	☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
ı	Yes.					
t t	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each on han one creditor holds a particular claim, list the other Part 2.	claim. For each claim listed, identify w	hat type of cl	aim it is. Do not list claims a	Iready included in Pa	art 1. If more
					Total cla	aim
4.1	Best Egg	Last 4 digits of account num	ber			Unknown
	Nonpriority Creditor's Name	When was the debt incurred	•			
	4315 Pickett Road PO Box 3999	When was the dept incurred	·			
	Saint Joseph, MO 64503					
	Number Street City State Zip Code	As of the date you file, the cl	aim is: Check	k all that apply		
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unser	cured ciaim:			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a	apparation of	grooment or diverse that you	ı did not	
	Is the claim subject to offset?	report as priority claims	separation ag	greement of divorce that you	. did flot	
	■ No	Debts to pension or profit-s	haring plans,	and other similar debts		
	☐ Yes	Other. Specify				
		· ,				
Part	3: List Others to Be Notified About a Del	ot That You Already Listed				
is t hav	e this page only if you have others to be notified a rying to collect from you for a debt you owe to so we more than one creditor for any of the debts tha tified for any debts in Parts 1 or 2, do not fill out o	meone else, list the original credit t you listed in Parts 1 or 2, list the	or in Parts 1	or 2, then list the collection	on agency here. Sin	milarly, if you
Part	4: Add the Amounts for Each Type of Un	secured Claim				
	tal the amounts of certain types of unsecured clai		cal reporting	purposes only. 28 U.S.C.	§159. Add the amo	unts for each
typ	e of unsecured claim.		_	-		
				Total Claim		
Total	6a. Domestic support obligations	S	6a.	\$	0.00	
Total claim from		s you owe the government	6b.	\$	0.00	

Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main Document Page 5 of 6
Case number (if known) 19-28683

Debtor 1 Jo	rge E L	ema Document P	aye	Case nu	ımber (if known)	19-28683
	6c.	Claims for death or personal injury while you were intoxicat	ted	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amoun	it here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.		6e.	\$	0.00
	6f.	Student loans		6f.	Tota	al Claim
Total claims	Oi.	State it is any		01.	Φ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce you did not report as priority claims	e that	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar of	debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that am here.	ount	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.		6j.	\$	0.00

Case 19-28683-SLM Doc 19 Filed 11/14/19 Entered 11/14/19 11:22:47 Desc Main Document Page 6 of 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Jorge E Lema			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERS	EY	
_	19-28683			
(if known)				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below			
Did you pay or agree to pay someone who is NOT ar	n attorney to help you fill out bankruptcy forms?		
■ No			
Yes. Name of person Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official Fo			
Under penalty of perjury, I declare that I have read the that they are true and correct.	e summary and schedules filed with this declaration and		
X /s/ Jorge E Lema	X		
Jorge E Lema Signature of Debtor 1	Signature of Debtor 2		
Date November 14, 2019	Date		